PTO/SB/17 (12-04)

Solder the Paperwork Reduction Act of 1995, no persons are require	Appr U.S. Patent and Traden ed to respond to a collection o	oved for use thronark Office; U.S. finformation unless	ough 07/31/2006. OMB 0651-0032 DEPARTMENT OF COMMERCE s it displays a valid OMB control number	
Effective on 12/08/2004.	Complete if Known			
Fees pursuant to the Consolidated Appropriations Act. 2005 (H.R. 4818)	Application Number 10/685,734		·	
FEE TRANSMITTAL	Filing Date	October 15, 20	03	
For FY 2005	First Named Inventor	BRIAN C. DAIS	S ET AL.	
Applicant claims small entity status. See 37 C.F.R. 1.27	Examiner Name	James N. Sma	lley	
	Art Unit	3727	(1.2220)	
TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. 00050.093400 (J-3329)				
METHOD OF PAYMENT (check all that apply)				
Check Credit Card Money Order Other (please identify):  Deposit Account Deposit Account Number: 06-1205  For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)				
Charge fee(s) indicated below  Charge any additional fee(s) or underpayments of fee(s) under 37 C.F.R. 1.16 and 1.17  Charge fee(s) indicated below, except for the filing fee  Charge fee(s) indicated below, except for the filing fee  Credit any overpayments				
WARNING: Information on this form may become public. Credit card information information and authorization on PTO-2038.	on should not be included on thi	s form. Provide cred	lit card	
FEE CALCULATION				
BASIC FILING, SEARCH, AND EXAMINATION FEES     FILING FEES SEARCH FEES EXAMINATION FEES     Small Entity Small Entity      Small Entity    Comparison of the comparison o				
Application Type Fee (\$) Fee (\$)			Fees Paid (\$)	
Utility         300         150         500           Design         200         100         100				
Plant 200 100 300				
Reissue 300 150 500	250 60	0 300	<del> </del>	
2. EXCESS CLAIM FEES  Fee Description Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple dependent claims  Small Entity Fee(\$) 50 25 100 100 180				
Total Claims Extra Claims Fee (\$) Fee Pa	aid (\$) Multip	le Dependent Cla	<u>ims</u>	
$\frac{31}{HP}$ = highest number of total claims paid for, if greater than 20		<u>ee(\$)</u> <u>F</u>	ee Paid (\$)	
Indep. Claims Extra Claims Fee(\$)	Fee Paid (\$)			
4 - 3 or HP = 0 x 0 = 0 HP = highest number of independent claims paid for, if greater than 3				
<ol> <li>APPLICATION SIZE FEE         If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).     </li> </ol>				
	dditional 50 or fraction there		<u>Fee Paid (\$)</u>	
100 = / 50 = (round up to a whole number) x = 4. OTHER FEE(S) Fees Paid (\$)				
Non-English Specification, \$130 fee (no small entity discount)				
Other:				
SUBMITTED BY				
Signature	Registration No. (Attorney/Agent)	55,112	Telephone 202-530-1010	
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SUBMITTED BY	10 1		
Signature	HAD D.	Registration No. (Attorney/Agent) 55,112	Telephone 202-530-1010
Name (Print/Type)	Michael J. Didas		Date: August 8, 2005

## **PATENT APPLICATION**

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	)
. *	: Examiner: James N. Smalley
Brian C. DAIS et al.	)
	: Group Art Unit: 3727
Application No.: 10/685,734	)
	:
Filed: October 15, 2003	)
	<b>:</b>
For: CONTAINER WITH	)
SELECTIVELY VENTED	: August 8, 2005
LID	) (Monday)

## Mail Stop Amendment

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

## **AMENDMENT**

Sir:

In response to the Office Action dated May 6, 2005, Applicants submit the following amendments and remarks.